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02/11/2004

INTELLECTUAL PROPERTY GROUP  
 FREDRIKSON & BYRON, P.A.  
 4000 PILLSBURY CENTER  
 200 SOUTH SIXTH STREET  
 MINNEAPOLIS, MN 55402

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Stacy Bickel	(Depositor's name)
<i>Stacy Bickel</i>	(Signature)
April 5, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/051,988	01/16/2002	Paul Trpkovski	44046.103.218	9182

TITLE OF INVENTION: METHODS AND APPARATUS FOR MANUFACTURING MUNTIN BAR ASSEMBLIES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	05/11/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
KING, ANITA M	3632	052-206000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Allen W. Groenke

2 Frédrikson &amp; Byron, P.A.

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## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cardinal IG Company

775 Prairie Center Drive, Suite 200  
 Eden Prairie, MN 55344

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☐ Advance Order - # of Copies

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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-1910 (enclose an extra copy of this form).

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01 FC:1501

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